## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE APPLICATION OF:

DAVID M. RINEHART ET. AI

SERIAL NO.: 10/817,492

FILED: APRIL 02, 2004

CASE NO.: AD6992 US NA

GROUP ART UNIT: 1772

EXAMINER: ALEXANDER S. THOMAS

FOR: GLASS LAMINATES HAVING IMPROVED STRUCTURAL INTEGRITY

AGAINST SEVERE STRESSES FOR USE IN EXTERNAL PRESSURE PLATE

**GLAZING APPLICATIONS** 

## SUBMISSION OF CORRECTED DRAWINGS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicants submit corrected drawings herewith.

Figure 2 is amended to refer to elements 6 and 6a, whereas previously it listed "6" twice. The 6 and 6a were placed on the left and right side of the figure. Support is at page 11, line 29 – page 12, line 27, which paragraph is being amended to correct the numbers. These changes are evident because this paragraph describes glazing element 6 comprising a glass (7)/interlayer (8)/glass (7) laminate, and a first attachment clip (9) and adjacent glazing element (6a) comprising a second glass (7)/interlayer (8)/glass (7) laminate and having a second attachment clip (9a).

Applicants also removed four unnecessary lines from Figures 2 and 3, each near the gaskets labeled 12. As can be seen from the description is at page 11, line 29 – page 12, line 27, these lines were drawn through air and did not belong in the drawings.

Entry is respectfully requested.

Respectfully submitted,

Mark D. Kuller

ATTORNEY FOR APPLICANTS

Registration No.: 31,925 Telephone: (302) 892-1354 Facsimile: (302) 992-2953

Much O. Kelk

Dated: February 23, 2006



PTO/SB/92 (09-04) Approved for use through 07/31/2006. OMB 0561-0031
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10/817492				

AD6992USNA

Petition for Extension of Time (1 page)

Fee Transmittal (1 page) Fee Transmittal (1 page)

Response (15 pages)

Terminal Disclaimer to Obviate a Provisional Double Patenting Rejection over a Pending "Reference" Application (1

Submission of Corrected Drawings (4 pages)

Second Information Disclosure Statement (2 pages)

PTO/SB/08A (1 page)

PTO/SB/08B (1 page)

References

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).							
FEE TRANSMITTAL	Application Number Filing Date	April 02, 2004					
For FY 2006	First Named Inventor	David M. Rinehart Et.	<u></u>				
FOI F1 2000							
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Thomas					
TOTAL AMOUNT OF PAYMENT (\$) 500.00	Art Unit	1772					
TOTAL AMOUNT OF PATIMENT (4) 500.00	Attomey Docket No.	AD6992USNA					
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Non	ne Other (please id	entify):					
Deposit Account Deposit Account Number: 04-1928 D	eposit Account Name: E. I	. du Pont de Nemou	rs and Company				
For the above-identified deposit account, the Director is her	reby authorized to: (checl	all that apply)					
✓ Charge fee(s) indicated below	Charge fee(s	) indicated below, excep	t for the filing fee				
Charge any additional fee(s) or underpayments of fe	e(s) Credit any ov	rerpayments					
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Each independent claim over 3 (including Reissues)		200	100				
Multiple dependent claims		360	180				
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listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
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4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)							
Other (e.g., late filing surcharge):							
SUBMITTED BY  Signature  Registration No. 31,925  Telephone (302) 892-1354							
Signature Mush () Kully	(Attorney/Agent) 31,92						
Name (Print/Type) Mark D. Kuller		Date 2/23/	2006				

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(Attorney/Agent)			Complete if Known					
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METHOD OF PAYMENT (check all that apply)			Examiner Name	Alexander S. Thomas				
METHOD OF PAYMENT (check all that apply)	Applicant claims small entity st	atus. See 37 CFR 1.27	Art Unit	1772				
Check	TOTAL AMOUNT OF PAYMENT	(\$) 130.00	Attorney Docket No.	AD6992USNA				
Deposit Account   Deposit Account Number   O4-1928   Deposit Account Name: E. I. du Pont de Nemours and Company For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   Charge fee(s) indicated below, except for the filing fee   Charge area additional fee(s) or underpayments of fee(s)   Credit any overpayments   Charge fee(s) indicated below, except for the filing fee   Charge area additional fee(s) or underpayments of fee(s)   Credit any overpayments   Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038.    Fee CALCULATION (All the fees below are due upon filling or may be subject to a surcharge.)	METHOD OF PAYMENT (chec	k all that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below	Check Credit Card Money Order None Other (please identify):							
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Signature Much (), Kullu Registration No. 31,925 Telephone (302) 892-1354	SUBMITTED BY							
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